PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09839643

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
			(Column	1)	(Colu	mn 2)		TYPE		OR	SMALL	
TC	TAL CLAIMS					L wast.		RATE	FEE		RATE	FEE
FO	R		NUMBER F	ILED	NUMB	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
то	TAL CHARGEA	BLE CLAIMS	20 minus 20= * − 0			,		X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	2 minus 3 = * -0					X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If	the difference	in column 1 is	ro, ente	r "0" in c	olumn 2		TOTAL		OR	TOTAL		
	CI	_AIMS AS A	MENDED		١	<u> </u>	•	OTHER				
		(Column 1) CLAIMS	Description of the second	(Colu	mn 2) IEST	(Column 3)		SMALL		OR	SMALL	
ENT A		REMAINING AFTER AMENDMENT		NUM PREVI	IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	· 20	Minus	<i></i> ∠		=		X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	.45	Minus	*** &	33	= 2		X40=	42	OR	X80=	
Ľ	FIRST PRESE	NTATION OF MI	JLTIPLE DEP	PENDEN	I CLAIM			+135=		OR	+270=	
								TOTAL	11 01		TOTAL	
						(5.1		ADDIT. FEE	42 M	LOU.	ADDIT. FEE	· .
_		(Column 1) CLAIMS			mn 2) ∃EST	(Column 3)	1 6		4 D D I			4551
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME!	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDEN	T CLAIM]	+135=		OR	+270=	
								TOTAL		OR	TOTAL	
				•	ADDIT. FEE		10,1	ADDIT. FEE				
_		(Column 1) CLAIMS	14 72 3 75		mn 2) HEST	(Column 3)	1,				-	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUN PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	. = =	OR	X\$18=	
	Independent	*	Minus	***		=]	X40=			X80=	
ľ	FIRST PRESE]	7.40-		OR							
	If the entering and		ho onterio sel	mn O	10 "O" i=	dumn 2		+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

PTO/SB/06 (08-00)

Approved for use through 10/31/2002. OMB 0651-0032

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PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number LIB 2000														
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY			OR	OTHER TO	1
FOR NUMBER FILED					NUMBER EXTRA				RATE		FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))										And Country	s 355	OR		\$
TOTAL CLAIMS (37 CFR 1.16(c)) minu					s 20 = *				\$	=		OR	x \$=	
	EPENDENT CLA		minu	s 3 =	*			х=		OR	x =			
					FR 1.16(d))			+=			OR	+=		
* If the difference in column 1 is less then zero, enter "0" in column 2									TOTAL 355				TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								. s	SMALI	L EN	ITITY	OR	OTHER T	1
AMENDMENT A		CLAI REMAII AFTE AMEND	NING ER		NU PREV	GHEST UMBER VIOUSLY ID FOR	PRESENT EXTRA	RATE x \$=			ADDI- FEE		RATE	ADDI- TIONAL FEE
NDN.	Total (37 CFR 1.16(c))	*		Minus	**		=			=		OR	x \$=	
ME	Independent (37 CFR 1.16(b))	*		Minus	***		=	x	:	_		OR OR	x=	
V	FIRST PRESENTATION OF MULTIPLE DEP					ENDENT CLAIM (37 CFR 1.16(d))				=		OR	+=	
(Column 1) (Column 2) (Column 3)									TOTAL			OR	TOTAL DDIT, FEE	
ENT B		CLAI REMAI AFTI AMEND	MS NING ER		HIO NU PRE	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA	1	RATE	ADDI- TIONAL FEE	,	RATE	ADDI- TIONAL FEE	
VIDIM	Total (37 CFR 1.16(c))	*		Minus	**		=	x	\$	=		OR	x \$ =	
AMENDMENT	Independent (37 CFR 1.16(b))	*		Minus	***		=	x	x			OR OR	x=	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))									=		OR	+=	
(Column 1) (Column 2) (Column 3)									TOTA DIT. FE			OR _A	TOTAL ADDIT. FEE	
AMENDMENT C		CLAI REMAI AFTI AMEND	NING ER		NI PRE	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	3	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	*		Minus	**		=] x	\$	=		OR	x \$=	
	Independent (37 CFR 1.16(b))	*		Minus	***		=	x	·	=		OR OR	x=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))								-	.=		OR	+=	
* I	f the entry in colu	mn I is les	s than the	entry in colum	n 2, wr	ite "0" in colu	mn 3.	AE	TOT.			OR	TOTAL ADDIT. FEE	

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*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

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